

RESPONSE UNDER 37 CFR 1.116  
EXPEDITED PROCEDURE



Group Art Unit: 2878  
Examiner: Lee, S.

Atty. Ref.: H 2182

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Martin Klein  
Christian Schmidt

Appl. No. : 10/047,556

Filed : October 23, 2001

For : DETECTOR

MS AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

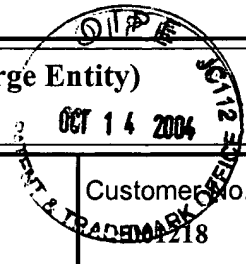
AMENDMENT AFTER FINAL REJECTION

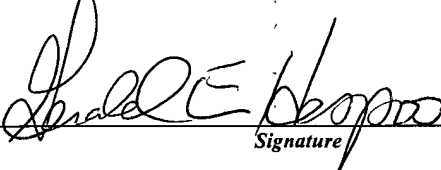

Sir:

This amendment is submitted in response to the Office Action of  
July 26, 2004. Please amend the application as follows:

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AF



<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>					Docket No. <b>H 2182</b>	
Applicant(s): <b>Martin Klein et al.</b>						
Application No. <b>10/047,556</b>	Filing Date <b>October 23, 2001</b>	Examiner <b>Lee, S.</b>	Customer No. <b>101218</b>	Group Art Unit <b>2878</b>	Confirmation No. <b>4171</b>	
Invention: <b>DETECTOR</b>						
<b>COMMISSIONER FOR PATENTS:</b>						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	12 -	20 =	0 x	\$18.00	\$0.00	
INDEP. CLAIMS	4 -	4 =	0 x	\$86.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <b>03-1030</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>						
 Signature			Dated: <b>October 12, 2004</b>			
<b>Gerald E. Hespos, Esq.</b> Atty. Reg. No. 30,066 <b>CASELLA &amp; HESPOS LLP</b> 274 Madison Avenue - Suite 1703 New York, NY 10016 Tel. (212) 725-2450 Fax (212) 725-2452			<div style="border: 1px solid black; padding: 5px;"><p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on</p><p style="text-align:center"><u>October 12, 2004</u> (Date)</p><p style="text-align:center"> Signature of Person Mailing Correspondence</p><p style="text-align:center"><b>Hilda A. Abreu</b> Typed or Printed Name of Person Mailing Correspondence</p></div>			
cc: <b>BEST AVAILABLE COPY</b>						